



Richard Cunningham, MD
Complex Knee & Shoulder Surgery
Fellowship Trained in Sports Medicine

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GENERAL RISKS WITH SURGERY

All surgeries have some risk, and we want you to understand these risks so that you can be informed and can consent to surgery with an understanding of these risks. Although complications do occur, fortunately they are quite infrequent. All of us at Vail-Summit Orthopaedics will use our expertise to try and prevent any complication. If any problems do arise, we will monitor you closely and be here to do whatever we can to help you work through these and hopefully recover from them.

ANESTHESIA: General anesthesia is used for many of our procedures. You will be under the care of an anesthesiology provider throughout the operation. Once you are settled on the operating table, you will be connected to several different monitors. An oxygen mask will be placed over your nose and mouth and oxygen administered. Through your IV, a quick-acting sedating anesthetic will be given after you have breathed oxygen for a few minutes. Once you fall asleep, your anesthesiologist will insert an endotracheal tube through your mouth into your windpipe and an anesthesia machine will then breath for you. Anesthetic agents are administered to keep you asleep and pain medicines are administered if there is any sign that you are experiencing pain.

Many patients have a fear of general anesthesia but it is very safe. After having done surgery on thousands of patients, Dr. Cunningham has never witnessed any serious side effects or complications from general anesthesia. Today, very sensitive monitors used during surgery have greatly reduced the risks of anesthesia. Any minute change in your oxygen level, carbon dioxide level, heart rate, blood pressure, heart rhythm are reported immediately to the anesthesiologist. The sophisticated monitoring now used makes recognition and treatment of problems with anesthesia almost immediate.

You will meet your anesthesiologist prior to surgery and they inform you of what sort of anesthesia they recommend and any possible risks and complications. In addition to a general anesthetic or a spinal anesthetic, the anesthesiologist will commonly do selective nerve root blocks which help control pain after surgery and decrease the need for the amount of general anesthetic required to keep you sedated during surgery. For example, for more extensive knee surgeries, we commonly employ a femoral nerve block and sometimes an additional sciatic nerve block. For shoulder surgeries, we commonly employ an interscalene nerve block. Like all procedures, these nerve blocks have some small risk associated with them so they are only utilized when the benefits outweigh the risk.

POST-OPERATIVE INFECTION: Surgical site infections are rare. As the Chief of Surgery at Vail Valley Medical Center, Dr. Cunningham closely tracks the rates of infections at the hospitals and surgery centers where his surgeries are done. Our surgical site infection rates at these facilities across all orthopedic procedures is around 0.3% which compares favorably with national averages of around 1%.

Although most surgical wounds may have some associated redness and swelling, if you notice increasing redness around the surgical area or streaking which is quickly worsening, this may be an indication of an infection. Other signs or symptoms of infection are temperature over 101degrees for a few days (keep in mind that you may have an elevated temperature for the first few days after surgery), yellowish discharge from wound or a feeling of being sick or overly tired. If you think you may have an infection, please call the office.



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DEEP VEIN THROMBOSIS (DVT): In orthopedic surgery, there is an increased risk of developing a deep vein thrombosis, most commonly in the affected leg. This can occur as a result of leg immobility with subsequent stasis and pooling of blood in a vein and subsequent clotting. Clots in a calf are not typically dangerous as they do not commonly migrate higher up in the leg. However, these calf clots can be painful and problematic. Clots in the veins of the deep thigh or pelvis are more dangerous as these clots can break up with pieces of clots then going to one's lungs and negatively affecting one's pulmonary function. To reduce the risk of a DVT, we prescribe blood thinning medication. Usually, a daily aspirin, compression stockings, and mobilization and physical therapy exercises are sufficient to prevent a DVT from forming. In higher risk patients, a stronger blood thinner may be prescribed.

NERVE AND BLOOD VESSEL INJURY: In orthopedic surgery, we are commonly working around nerves, arteries and veins. Dr. Cunningham knows where these structures are and does everything possible to protect them. Sometimes a nerve has to be retracted out of the way to fix a torn ligament or tendon and in doing so the nerve then shuts down for a period of time leaving a patient with nerve pain, weakness in a muscle, or even the inability to move a joint. These stretch injuries to nerves usually all resolve but this can take months.

As for arteries and veins, these are always protected but sometimes are injured with surgery. Dr. Cunningham has never cut or injured a major artery or vein leading to loss of limb or other such terrible complication but these sorts of complications have been reported by other surgeons unfortunately.

BRUISING AND SWELLING: Bruising and swelling are normal after surgery. You may see bruising and swelling on the quadriceps (muscle on front of the thigh), on the hamstrings (muscle on the bottom of the thigh) and in your lower leg and foot. This is normal and typically resolves over the first few weeks. Elevating the leg above heart and doing your physical therapy exercises will help reduce the bruising and swelling as well.

After shoulder surgery, there is also some associated swelling and bruising about the shoulder and this may track down into the hand. Some patients even have to take their rings off due to swelling in their fingers. Some swelling can also track down into the chest wall and pectoralis muscle area and have associated bruising in this area.

PAIN: Pain and discomfort are normal symptoms after surgery. In more extensive surgical cases, a nerve block may be done by your anesthesiologist, and these can be very successful at decreasing pain. Narcotic pain medications are also prescribed and these can be helpful in the short term, but they do have an addictive potential and other side effects such as nausea and constipation so we try to get you off you off medications as soon as possible. However, no amount of medications will totally remove your discomfort, but medications are used to make the pain more tolerable. Ice and elevation are also very helpful to help alleviate pain.